# UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency Washington, DC 20250

FCIC	Program Integrity 4-RM	Amendment 1
Act	ting Deputy Administrator, Farming Deputy Administrators, Comp	pliance and Insurance Services, RMA
Amendment Tran	smittal	
A Reasons for Issuance	and County Offices, RMA, and Insurance Program compliance Protection Act 2000 (2000 Act The 2000 Act identified 4 area County area and investigations Coulomb and investigations County and	as that this handbook will address: s of FSA and RMA employees from various offices

4-6-01 Page 1

Notice CP-530 is obsolete.

В

Obsolete

Material

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#### Part 1 Basic Provisions

#### 1 Overview

## A Background

The Agricultural Risk Protection Act 2000 (2000 Act) requires FSA and RMA to:

- Cop Insurance Program compliance and integrity of the Federal Crop Insurance Program
- C develop a coordinated plan for implementation.

# B Oversight and Coordination

The following offices are conducting oversight and coordination of this effort in consultation with OIG and crop insurance companies:

- C FSA, PECD
- C RMA RCO's
- C RMA RO's
- C RMA, Deputy Administrator for Research and Development.

# C Handbook Purpose

This handbook provides FSA and RMA offices procedure based on the joint work plans developed as a result of the 2000 Act. The areas covered by this handbook include the following:

- C referrals and investigations
- C claims audit
- C consultation with STC's
- C data reconciliation.

## 2 Sources of Authority and Related Handbooks

#### A

# Statutory Authority

The statutory authority for FSA and RMA to improve program integrity is Subtitle B, Section 121 of the 2000 Act.

# B STC Authority to Supplement This

Because this handbook is a joint effort between FSA and RMA, STC's do **not** have the authority to modify this handbook. Any recommendations for amendment must be submitted to the National Office for concurrence by both FSA and RMA.

# C Related Handbooks

Handbook

FSA and RMA handbooks related to program compliance include the following:

- C 9-AO for handling audits and investigations
- C 1-CM for name, address, and producer ID number verification
- C 3-CM for farm records management
- C 2-CP for verifying acreage and completing field visits
- C FCIC Loss Adjustment Manual and specific crop insurance Loss Adjustment Standard manuals
- C 5-LP for bin measurements
- C 1-PL for reviewing farm operating plans.

#### A Overview

With the passage of the 2000 Act, FSA and RMA are:

- C required to coordinate a plan to identify, address, and reconcile discrepancies of all relevant producer-derived information
- C directed to coordinate a monitoring program, which includes fact finding relative to allegations of program fraud, waste, and abuse.

As a key preventative measure, it is important that the agricultural community be made fully aware of FSA's and RMA's joint efforts to reduce fraud, waste, and abuse.

# B When to Provide Information

At a minimum, County Offices shall notify all producers twice a year of the monitoring efforts by FSA and RMA to prevent fraud, waste, and abuse in the Federal Crop Insurance Program.

This notification shall be publicized at the beginning of the calendar year and again during the crop growing season.

**Note:** It may be appropriate to publicize this information more than twice, depending on the planting and harvest seasons for different crops in a county.

# C What Information to Provide

County Offices shall notify producers that:

- C FSA will be assisting RMA and insurance providers in monitoring crop conditions throughout the growing season
- FSA will refer all suspected cases of fraud, waste, and abuse about the Federal Crop Insurance Program to RMA
- C producers may report suspected cases of fraud, waste, and abuse to their local County Office, RMA office, or OIG
- C FSA will assist RMA with auditing claims.

## 3 Publication Requirements (Continued)

#### D

# **Methods of Notification**

County Offices shall notify all producers of the efforts to reduce fraud, waste, and abuse of the Federal Crop Insurance Program by any means of communications, including, but not limited to, the following:

- C news releases
- C newsletters
- C radio and television spots
- C fact sheets.

# 4 Points of Contact

#### A

# **Designating FSA POC**

Each SED shall establish a POC and alternate who shall:

- c serve as the primary contact for all functions associated with implementing the 2000 Act within their State
- C be responsible for maintaining the lines of communication between RMA and FSA at the Regional and State levels
- be responsible for POC responsibilities in this handbook.

# B Designating RMA POC

Each RCO shall establish a POC and alternate who shall:

- c serve as the primary contact for all functions associated with implementing the 2000 Act within its region
- be responsible for maintaining the lines of communication between RMA, FSA, and the insurance provider at the Regional and State levels
- C perform the duties required under these procedures.

#### 5-19 (Reserved)

#### 20 Overview

## A Background

County Offices have the authority and responsibility to keep an active watch for potential fraud, waste, and abuse of the Federal Crop Insurance Program. RMA also has the authority to request assistance from FSA in monitoring the Federal Crop Insurance Program. County Offices shall document observations and gather the documentation necessary to validate concerns according to this part.

#### 21 Responsibilities

# A County Office Responsibilities

County Offices shall:

- C accept any form of complaint from any complainant as accurately as possible
- C keep an active watch for potential fraud, waste, and abuse of the Federal Crop Insurance Program
- document observations and gather the evidence necessary to validate concerns
- C honor any request by complainant with regard to confidentiality
- C follow timeframes as outlined in this handbook
- C follow publicity requirements as outlined in this handbook
- C take specified actions on a case-by-case basis under the direction of the State Office POC
- conducted for the crop year by January 31 of the subsequent year

**Note:** This will include reviews that result in no questionable findings.

timely provide requested information to insurance providers, agents, and loss adjusters following procedure in 2-CP, paragraph 508.

#### B SED

# Responsibilities

SED is responsible for approving either of the following:

- C further inquiry by FSA
- the referral of the case to OIG when RCO fails to timely respond to or declines to proceed with an investigation according to paragraph 73.

# C State Office POC Responsibilities

The State Office POC or alternate shall:

- C serve as the liaison between the County Office and RCO
- forward all RCO spot check lists and referrals received from RCO to the applicable County Office
- forward all County Office responses to referrals initiated by RCO back to RCO within the specified timeframe

**Note:** A list of addresses with States served for each RCO is in Exhibit 5.

- C be responsible for ensuring that referrals from the County Office are complete and that all necessary documentation is provided
- c notify the County Office of County Office-initiated referrals that POC determines are unwarranted and will not be forwarded to RCO
- C make initial determination for FSA to conduct its own investigation or refer the case to OIG, subject to SED approval, when RCO fails to timely respond to or declines to proceed with an investigation, according to subparagraph 73 B.

D

# **DD Responsibilities**

DD's shall:

- monitor the referral process within their respective district
- C assist State and County Offices with the referral process as requested.

# E

# **RCO**

#### Responsibilities

RCO shall:

- Coordinate all referral activities and request for inquiries through the State Office POC
- develop and provide, to FSA POC, spot check lists for annual reviews that identify high-risk policy holders on a county basis
- c submit referrals involving individual complaints of fraud, waste, or abuse to the County Office through the State Office POC
- c review all referrals received from FSA POC and determine whether further investigation is warranted
- C evaluate the appropriateness of actions taken by the insurance provider relative to the referred case
- c respond to the State Office POC within the specified timeframe for each case referred by POC
- C upon conclusion of the review process, provide a written summary of the review results to the State Office POC.

#### 22 Types of Referrals to RMA

# A Types of Referrals

The following are 2 types of referrals of suspected crop insurance fraud, waste, or abuse that may originate from a County Office:

a complaint received in the County Office by telephone, letter, in-person, etc., from an individual

**Example:** Producer Jones contacts the County Office to report that Producer Smith is not caring for the crop in a workmanlike manner.

© observations made by County Office employees or COC members.

**Examples:** While performing routine FSA compliance activities, it was noted that Producer Smith was using farming practices that were not considered normal or customary for the area.

While verifying production/income for loan making/loan servicing or LDP purposes, a significant discrepancy in data is noted between information provided from crop insurance records and information provided to FSA from the producer.

# A Accepting Initial Data

Once a County Office is aware of a suspected fraud, waste, or abuse case, AD-2007, Parts A and B must be completed as follows.

Part	Instructions	
A	C If the source of the complaint is from an individual, enter the individual's name and address. If the individual is unknown "Unknown" in item 2A. If the individual is known, but wis remain anonymous, enter "Confidential Informant" in item  C If the source of the complaint originates from an FSA empl	n, enter shes to 2A.
	COC member, enter the County Office name and address.	
В	County Offices shall follow the instructions in Exhibit 6.	

Once Parts A and B have been completed, the County Office shall refer to subparagraph B.

# B Verifying Crop Insurance

County Offices shall verify the insurance status of the producer's crop by contacting the applicable RCO.

IF the producer's crop is	THEN	the County Office shall
not insured	take no	o further action.
	Note:	If the information has an impact on FSA programs, thoroughly document findings and follow procedure in the applicable FSA program handbook.
insured	follow	Section 3.

#### **24-39** (Reserved)

#### 40 Overview

# A Background

RMA has the authority to request assistance from FSA in monitoring producers suspected of fraud, waste, or abuse. The following are the 2 basic types of FSA assistance requested by RCO:

- c spot checks of producers identified through RMA data mining or RCO criteria according to paragraph 41
- C when additional information is needed to establish the credibility of a complaint or when immediate presence is needed to document evidence before it is destroyed according to paragraph 42.

# 41 RMA-Requested Spot Checks and RMA-Initiated Complaint Referrals

# A RCO Spot Check List

RCO shall annually provide, by April 1, to the State Office POC a prioritized list of producers:

- C exhibiting high loss ratios, high frequency, and severity of losses
- C suspected of poor farming practices.

The triggering factors may vary in each RCO based on types of crops and loss experience. The list will be broken down by State and county and will include the producer's name and crops.

County Offices shall conduct reviews according to subparagraph 70 C.

#### 41 RMA-Requested Spot Checks and RMA-Initiated Complaint Referrals (Continued)

B Complaints Referred by RMA

RMA may request FSA assistance when RCO has received a complaint that requires a field visit.

Upon receipt of the request for assistance, County Offices shall conduct the requested fact finding and relay their observations to the State Office POC. Urgent requests need to be responded to without delay. For all other requests, the County Office shall report the information within 14 calendar days.

When immediate action is required, RCO shall telephone the State Office POC. If the State Office POC or alternate is not available, contact may be made directly to the County Office.

In other cases, the request for assistance will be made in writing to the County Office through the State Office POC.

County Offices shall conduct reviews according to paragraph 70.

#### **42-69** (Reserved)

#### **70 Review Requirements**

#### A Overview

County Offices may perform spot checks for RCO as a result of:

- c individual complaints received by the County Office, State Office, or RCO
- C observations noted by FSA employees or COC members
- C producers selected from the list provided by RCO.

# B County Office Action for Individual Complaint or County Office Observation

For reviews resulting from complaints received by the State Office POC or County Office, or reviews resulting from FSA employee or COC member observations, County Office reviews shall be limited to the specific farm or field in the complaint or observation. AD-2007 shall be completed according to instructions in Exhibit 6.

**Note:** County Offices must ensure that a sequential FSA reference number has been assigned and entered on AD-2007 according to Exhibit 6 for all reviews conducted for RCO.

# C County Office Action on RCO Spot Check List

For those reviews identified on the RCO spot check list, County Offices shall conduct referrals according to the larger of the first 10 insureds or the top 5 percent of the insureds on the list.

**Note:** If less than 10 insureds are identified on the list, County Offices shall check all insureds.

Of those required reviews, County Offices shall conduct a review on a minimum of 1 tract, which shall include all fields for all identified crops on the RCO spot check list.

C County Office Action on RCO Spot Check List

(Continued)

During routine FSA compliance activity, County Offices shall document findings for those insureds identified on the RCO spot check list. These reviews will be specific to only those compliance activities being conducted for FSA purposes and not the process listed under the required RCO reviews.

**Examples:**Bob Smith's farm will be visited as a result of a commodity loan inspection. Because Bob's name is on the RCO spot check list, the field and/or crop condition shall be documented on AD-2007. The County Office may expand the review to include additional fields and tracts if time permits.

Acreage determinations resulting from the Automated Farm Inspection Selection Register for FSA compliance shall also be used for acreage determinations for producers shown on the RCO spot check list. Producers whose crop acreage exceeds tolerance according to 4-CP, paragraph 22 shall be:

- C reported as a finding on AD-2007
- C forwarded to RCO POC through the State Office POC.

Although County Offices must meet the minimum number of required reviews and those reviews identified in conjunction with normal compliance activity, County Offices may expand reviews to additional tracts or fields as time or resources permit.

# 71 Fact Finding and **Documentation**

A
Fact Finding for
Individual
Complaints or
County Office
Observations

For those individual complaints received by County Offices or observations indicating possible fraud, waste, or abuse, fact finding shall be conducted relative to the applicable crop, acreage, and allegation. Fact finding may include, but is not limited to, the following:

- C reviewing FSA-578 and map, if applicable
- C field visit to conduct growing season inspections, take photographs, observe similar farms, etc.

# A Fact Finding for Individual Complaints or County Office Observations (Continued)

- C verifying production, if applicable, at local elevators, gins, etc.
- creviewing other FSA records, if available, such as LDP records, results of spot checks, disaster program applications, and FLP records
- Observing company loss adjusters performing appraisals only on a limited basis when requested by RCO.

# B Fact Finding for RCO Spot Check List

The County Office shall perform a minimum of 2 documented field inspections, 1 within 30 calendar days of the final planting date and 1 before harvest becoming general in the area.

The inspections shall include the following:

- C the kind of tillage methods the insured has carried out
- the kind of weed control practices that are being carried out
- C if a current soil test has been taken on any of the insured acreage
- C how the inspected crop compares with those in the general area
- C the type of fertilizer program being followed
- brief explanation of the weather in the past 4 to 6 weeks, the current conditions, and the expected weather conditions
- C brief description of any pertinent remarks
- C photographs of the fields inspected.

# $\mathbf{C}$

#### **Documentation**

The County Office shall compile supporting documentation that may include, but is not limited to, the following:

- C photocopy of FSA-578 and map, if acreage report has been filed
- C field notes
- C representative photographs
- C other available FSA records applicable to the inquiry
- other documents and items as requested by RCO through the State Office POC.

# D Submitting AD-2007

#### County Offices shall:

- for those reviews initiated at the County Office level, submit AD-2007 and all other supporting documentation to RCO through the State Office POC within 14 calendar days from the date the County Office becomes aware of the suspected fraud, waste, or abuse
- for reviews resulting from the RCO spot check list, submit AD-2007 and supporting documentation according to subparagraph B within 5 calendar days after the initial discovery of potential fraud, waste, or abuse. If no fraud, waste, or abuse is discovered, submit AD-2007 and supporting documentation within 5 calendar days after the final inspection.

A
County Office
Action for
Individual
Complaints or
County Office
Observations

Certain actions are required when County Offices are made aware of potential fraud, waste, or abuse as it applies to the Federal Crop Insurance Program. This table briefly summarizes steps for the County Office to follow when dealing with possible fraud, waste, or abuse cases.

Step		Action					
1	Document initial discovery of susp subparagraph 23 A.	ected fraud, waste, or abuse according to					
2	Verify producer's insurance status subparagraph 23 B.	for the crop or crops in question according to					
3	IF the crop is	THEN					
	not insured	no further action is required for RMA purposes. However, if the complaint could affect FSA programs, the complaint needs to be pursued for FSA purposes only.					
	insured conduct fact finding according to subparagraph 71 A.						
4	<u> </u>	ral of the case for possible fraud, waste, or abuse with the confidentiality of complainant.					
5	Document results of fact finding ef	forts according to subparagraph 71 C.					
6		ocumentation to RCO through the State Office POC within County Office becomes aware of the suspected fraud, shall be processed expeditiously.					
7	Perform an additional inquiry as re Office POC.	quested by the State Office POC or RCO through the State					

B County Office Action Relating to the RCO Spot

**Check List** 

This table briefly summarizes steps for County Offices to follow when performing reviews for those producers selected on the RCO spot check list.

Step	Actio	on					
1	Identify selected insureds and crops from the RO subparagraph 70 C.	CO spot check list according to					
2	Assign tracking number according to Exhibit 6.						
3	Conduct applicable inspections as outlined in su	bparagraph 71 B.					
4	IF the initial review results in	THEN					
	no finding	continue to conduct inspections throughout the growing season.					
	a finding of potential fraud, waste, and abuse go to step 5.						
5	Document results of fact finding efforts according	ng to subparagraph 71 C.					
6	Important: Do not discuss the specifics or do spot check list with any persons of	etails of the finding resulting from the RCO outside FSA or RMA.					
7	Submit AD-2007 and supporting documentation within 5 calendar days from the date the County inspections for which there were no findings, su Cases of urgency shall be processed expeditious	Office completes the inspection. For those bmit report according to subparagraph 71 D.					
8	Perform an additional inquiry as requested by the State Office POC.	e State Office POC or RCO through the					

# Record Keeping

County Offices shall:

- C assign an FSA tracking number for each review according to subparagraph A
- C prepare a file folder for each review for which a tracking number has been assigned
- C include a copy of all documentation and findings in the file folder, including, but not limited to, documentation items listed in subparagraph B
- C log the review on AD-2007A (Exhibit 10).

## A Processing Referrals

Upon receipt of the documentation and AD-2007 from the County Office, the State Office POC shall:

- C log the referral on AD-2007A (Exhibit 10)
- c ensure that AD-2007 is complete and that all necessary documentation is provided
- C request additional documentation from the County Office, if applicable
- C review all facts related to the referral to concur that the referral should be forwarded
- for referrals initiated at the County Office level that are determined to be unwarranted, return the referral and notify the County Office that the referral will not be acted upon
- forward all appropriate referrals to RCO using overnight mail within 7 calendar days after receipt from the County Office.

# B Post Referral Inquiry

For all types of referrals, if RCO has not provided a written response that describes intended action of RCO within 5 calendar days after receiving a submitted referral, the State Office POC, with SED approval:

- C may determine that FSA will conduct its own inquiry into the alleged fraud, waste, or abuse
- C shall notify RCO of the action that will be taken by FSA
- C may refer the matter to OIG according to 9-AO if, as a result of the inquiry, FSA concludes further investigation is warranted, but RCO declines to proceed with the investigation.

**Note:** For those referrals with no findings, a response from RCO POC is not required.

# A Action

For all types of referrals, upon receipt of AD-2007 and attached documentation from the State Office POC, RCO shall complete this table.

Step		Action							
1	Review referral and de	termine whether further review is warranted.							
2	Request additional info	ormation if necessary.							
3	Within 5 calendar days the intended action.	after receiving the referral, provide a written response that describes							
4	IF a review is	THEN RCO shall							
	not warranted	inform the State Office POC in writing.							
	warranted	determine whether RCO conducts the review:							
		C if a referral to the insurance provider is warranted c according to standard operating procedure.							
		C RCO shall prepare a transmittal letter to the company including the details of the complaint. Attach the supporting documentation provided by FSA. Do not forward the actual AD-2007 to the company.							
	C RCO shall evaluate the appropriateness of the actions taken by the insurance provider and determine whether further review is necessary.								
5	RCO may refer the cas	e to OIG at any time during the process.							
6	At the conclusion of the results to the State Offi	e review process, RCO shall provide a written summary of the review ice POC.							

#### A

# Action

If the review is referred by RCO to the insurance provider, the insurance provider shall:

- C perform a field review of the producer
- C take the appropriate action
- C document their actions
- C provide a report back to RCO on results of review and actions taken.

# **76-80** (Reserved)

#### 81 Overview

# A Background

The 2000 Act requires that FSA assist approved insurance providers and RMA in conducting claim audits for statistically selected Compliance Crop Insurance Contracts.

FCIC-14010, Manual 14 requires insurance providers to conduct quality control reviews that will:

- C provide assurances that procedures, systems, and programs are effective and adequate
- C be used to:
  - C expose intentional program abuse
  - C identify discrepancies, inconsistencies, or errors.

**Note:** One type of quality control review is the Compliance Crop Insurance Contract Review.

# B Purpose

This part provides procedure to State and County Offices for:

- C assisting insurance providers that are conducting a Compliance Crop Insurance Contract Review, herein after referred to as a claim audit or review
- C processing forms and letters received from RCO requesting producer information
- C assisting RCO's that are conducting evaluations of the insurance providers' claim reviews.

# A Insurance Provider Responsibilities

Annually, RMA, Deputy Administrator for Compliance statistically selects Compliance Crop Insurance Contracts (claims) for insurance providers to review. Insurance providers complete the reviews by verifying that all information on the claim provided by the policyholder, sales agent, and loss adjuster is correct.

Insurance providers:

- C may request information from State and County Offices to assist in the verification of the claim
- c should only be requesting information needed to complete their reviews.

The insurance provider representative shall submit FSA-426-A to the applicable State Office POC to obtain documents maintained in the County Office. Approved insurance provider representatives requesting producer documents shall provide:

- a completed FSA-426-A, items 1 through 14, according to paragraph 83
- C FSA-426-A to the applicable State Office POC.

# B RMA Responsibilities

RMA, Deputy Administrator for Compliance shall annually provide to PECD, Compliance Branch a file for distribution to State and County Offices, listing the statistically selected claims that will be reviewed by the insurance provider. The file is listed as follows:

- C State and county name
- C crop
- C insured name and ID
- C policy number.

**Note:** This list is provided for information purposes only. County Offices will not be providing information on all claims listed.

# B RMA Responsibilities (Continued)

After the insurance provider completes the claim reviews, RCO's shall evaluate a judgmental sample of the claim reviews. If discrepancies are discovered, RCO may submit a request to the applicable County Office for documentation that would resolve discrepancies in the insurance provider's claim review.

#### RCO's shall submit:

C FSA-426-A to the applicable County Office to request producer documentation

**Note:** See subparagraph 83 C.

- a copy to the State Office of FSA-426-A submitted to the County Office
- C personal identification to County Offices if requesting documents in person.

RCO's may request documentation that does not reside in the County Office and could require a field visit. Information obtained outside of the County Office can **only** be requested by RCO. RCO shall make the request using RMA letterhead. Request shall be sent to the State Office POC. See the example of a field request letter in Exhibit 12.

**Note:** Field visits may include the verification of information or data through independent sources.

# C State Office Responsibilities

The State Office POC shall:

- distribute to each applicable County Office the list of insureds that are included in the RMA Compliance Crop Insurance Contract Reviews sent from the FSA National Office
- C develop a tracking system for all requests from RCO and companies and serve as clearinghouse for all requests for information
- C ensure that:
  - C FSA-426-A is completed by requester before sending to the County Office
  - County Office has included all requested documentation before returning it to the requester
- C forward insurance provider's FSA-426-A to the applicable County Office
- C forward RCO request for a County Office field visit to the applicable County Office
- County Office will delay a timely turn around for processing the information request.

# D County Office Responsibilities

County Offices shall:

- C continue to give priority service to producers
- dentify and prevent conflict of interest situations involving County Office employees when conducting field visits

# D

# County Office Responsibilities (Continued)

- c verify the insureds listed on FSA-426-A are also on the RMA Compliance Crop Insurance Contract Review list sent from the State Office and then copy the following applicable documents as requested on FSA-426-A:
  - C CCC-502
  - C AD-1026A
  - C FSA-425, for peanut and tobacco insured
  - C FSA-578 (producer print), for current and prior years
  - price support loan or LDP documents and, if applicable, NAP loss claims or crop disaster applications
  - C map photocopy
  - C "Other" documents may be requested, such as producer lease agreements

**Notes:** The insurance provider must identify in FSA-426-A, "Remarks" section, the documents being requested.

Request for documents other than those listed should:

- C be limited
- C not include all insureds being reviewed.
- county Office receives FSA-426-A
- c mail copies of requested documents to the applicable insurance provider or RCO
- c send a copy of FSA-426-A to the State Office POC with item 15 completed for logging and tracking purposes
- c notify the State Office POC immediately if documents requested cannot be processed within the 7 workday timeframe or do not exist
- document results of field visits requested by RCO. Request for a field visit shall be submitted on RMA letterhead and sent to the State Office. See the example of a field request letter in Exhibit 12. Send a copy of the information provided to RCO to the State Office POC.

A FSA-426-A Required Entries

The State Office POC shall review, upon receipt from the requester, FSA-426-A, items 1 through 14, for information completed according to the following table.

Item		
Number	Item Definition	Item Description
1	FSA County Office Name, Address and Telephone No.	Insured's FSA Administrative County Office
2	Crop Year	Crop year for claim
3	Date	Date of information request
4	Requester's Name	C Insurance provider representative's name C RMA compliance investigator's name
5	Phone Number	Telephone number for the:
		C insurance provider representative C RMA compliance investigator.
6	Requester	As applicable, check:
		C "Company Request", for insurance provider representative C "RMA Request", for RMA compliance investigator
7	Insured Name	Producer's name identified for the claim review
8	ID Number	Social Security or tax identification number of the insured
9	Crop	Crop selected for claim review
10	Policy Number	Crop insurance policy number for the insured
11	Information Requested	Check appropriate boxes that are applicable to the claim review. See subparagraph B.
12	Request Information to be:  C mailed C available for pickup	Check applicable box and mailing address if the documents requested are to be mailed.
13	Remarks	Identify other information being requested.
14A	Requester's Signature	C Insurance provider representative C RMA compliance investigator
14B	Title	Includes insurance company or RCO requesting information.
		Example: ABC Insurance Company, Quality Control Reviewer, or RMA Western Regional Compliance Office.
14C	Date	Date the requester signed FSA-426-A.

# B Forms Identified on FSA-426-A

The following table identifies the forms listed on FSA-426-A and the information that can corroborate information on a claim review. The insurance provider or RCO shall only request the needed forms.

Form Number	Form Description	Information To Be Verified
CCC-502  (Includes CCC-502A-Individual, CCC-502B-Joint Venture or General Partnership, CCC-502C-Corporation, Limited Partnerships of Other Similar Entities as applicable)	Farm Operating Plan for payment limitation review	Share lease or cash lease agreements, entity information, other farming interests
AD-1026A	Identifies Highly Erodible Land Conservation (HELC) and Wetland Conservation (WC) Certification.	Producer name, address, and telephone number, multi-county producer, control county and photo/grid, and land location.
FSA-578 (producer print) (prior or current year)	Report of Acreage by producer ID.	Crops planted, crop intended use, acres, and share. Total farmland and cropland.
FSA-425	A producer summary of the farm tract, base and yield information for tobacco and peanuts.	Effective quota, previous year marketing, and carryover pounds.
Price support loan documents, CCC-677, CCC-678, and CCC-Cotton A  Price support loan deficiency documents, CCC-666, CCC-709, and	Production evidence	Total production for a farm submitted for a loan.  Total production for a farm submitted for LDP.
CCC-Cotton AA  NAP loss claims or crop disaster program applications, if applicable		If applicable, production submitted for a crop disaster payment or NAP payment.
Map photocopy or aerial slides	Identifies the approximate boundaries of the crop on the farm.	Land location and crop conditions.
Other	Example: Lease Agreement	Share

C Example of FSA-426-A

Following is an example of FSA-426-A.

FSA-426-A U.S. DEPARTMENT OF AGRICULTURE (04-06-01) Farm Service Agency						1. C	COUNTY FSA OFFICE NAME, ADDRESS, AND TELEPHONE NO. (Include area code)							
MPCI	FCIC INFORMATI	ON REQUE	ST											
						(		) -						
						2. Cl	ROP Y	EAR		3. D	ATE .			
TEMS 4 THROUGH 14	TO BE COMPLETED	BY REQUES	TER											
. REQUESTER'S NAME		5. PHONE I	NUMBER		6	REQ								
		( )	-				Con Req	npany's juest		RMA Reque:	st			
7.	8.	9.	10.		(	✓ ) Che		11. INFORM				o produc	er.)	
PRODUCER'S NAME	ID NUMBER	Crop Name	Policy Num	ber	CCC- 502	AD- 1026A	FSA- 425	FSA-578 PRIOR YEAR PRODUCER PRINT	CU	FSA-578 RRENT YEAR PRODUCER PRINT	PRODUC- TION EVIDENCE	MAP PHOTO COPIES	OTHER	
				_					_					
				$\dashv$					-					
				$\dashv$					-					
				$\dashv$								-		
				$\dashv$										
				$\dashv$										
				+										
				$\dashv$										
2A. I REQUEST INFORM	ATION TO BE:			12B.	ADDF	RESS, I	F MAIL	_ED						
MAILE	ED AVA	ILABLE FOR F	ICK UP											
3. REMARKS														
4. CERTIFICATION  I certify that the producer(	s) listed above has a cum	ent nolicy subje	ot to review	This i	nform	etion w	ill he u	sed solely h	, the	ineurance (	omnany	l renrese	ant for	
the express purpose of fu	filling its loss adjustment a	and compliance	obligations.	71110 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	411017 11	DO U				iompany	rroprose	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
A. REQUESTER'S SIGNA	TURE	B. TITLE						ľ	D. DA	ATE				
5. TO BE COMPLETE	D BY FSA ONLY													
A. DATE RECEIVED	B. DATE FURNIS	SHED	C. WOF	RK LO	AD D/	ATA		С	). INI	ITIALS				
The U.S. Department of Agriculture and marital or family status. (Not a should contact USDA's TARGET C	(USDA) prohibits discrimination in Il prohibited bases apply to all prog	all its programs and grams.) Persons with	activities on the disabilities who	basis of require	race, c alternat	olor, natio	nal origin	, gender, religio munication of pr	n, age, ogram	disability, politi information (Br	cal beliefs, s aille, large p	sexual orier rint, audiota	ntation, ape, etc.)	
noula contact USDA's TARGET C Avenue, SW, Washington, D.C. 20.	enter at (202) 720-2600 (voice and 250-9410 or call (202) 720-5964 (v	ז וטט). To file a cor oice or TDD). USD	npiaint of discrim I is an equal opp	ination, i ortunity	wnte US providei	DA, Direct and emp	ctor, Offic loyer.	e or Civil Rights	Room	1 526-W, Whitte	n Building,	400 Indep	endence	

A

Crop Year 2000 Contract Claim Review Results For crop year 2000 claim audits, FSA will provide assistance to insurance providers and RCO's by providing copies of documents that reside in the County Office to corroborate information in the insured's claim. County Offices shall also conduct field visits for RCO. This process will be evaluated before issuing additional procedures for FSA assistance in conducting future claim reviews.

**85-100 (Reserved)** 

Part 4 (Reserved)

101-119 (Reserved)

#### 120 Overview

#### A

# Background

The consultation process is a means for RMA and FSA to share and exchange FSA and RMA program information and to identify possible program areas of concern or discrepancies before they become effective. This information will include RMA crop program updates for existing programs, new programs, and program expansion. The consultation process will allow FSA the opportunity to review and make recommendations on policies, plans of insurance, and materials related to these policies or plans of insurance, including applicable final planting dates, assigned yields, and transitional yields (T-yields).

#### 121 Responsibilities

# A RMA

Responsibilities

RMA shall designate an RO POC and an alternate POC to be responsible for the coordination of STC consultation requests with the FSA State Office POC.

# B RO POC Responsibilities

#### RO POC shall:

- coordinate scheduling of requests with the State Office POC
- provide a request of actions to be taken
- provide State Office POC information for review in conjunction with the request for feedback
- upon receipt of an STC recommendation, provide a response of actions taken
- assign a tracking number to the consultation request and log request on AD-2006A (Exhibit 15) if initiated by RMA.

C STC

STC shall:

# Responsibilities

- if applicable, consult COC for input regarding requests for review of crop insurance program information
- review compiled data gathered by the State Office POC
- make recommendations to consultation requests submitted by RO POC
- when aware of program vulnerabilities in their State, STC must notify the State Office POC to initiate recommendation process
- identify, review, and recommend appropriate action to RO POC to change existing/proposed RMA T-yields, dates, practices, etc.

# D State Office POC Responsibilities

The State Office POC shall:

- maintain communications with RO POC
- coordinate scheduling of requests with RO POC
- conduct a cursory review of the request provided by RO POC
- complete fact finding

# D State Office POC Responsibilities (Continued)

- provide STC and RO POC with supporting documentation including any written justification as appropriate to address identified concerns
- present the request and findings of fact to STC
- document and forward STC recommendations to RO POC

**Note:** RO's addresses and States served are located in Exhibit 16.

- provide RO POC with STC written responses citing no concerns identified when appropriate
- assign a tracking number to the recommendation and log request on AD-2006A if initiated by STC or County Office.

# E COC Responsibilities

#### COC's shall:

 review documents submitted by the State Office POC and provide recommendations on AD-2006

**Note:** See Exhibit 17.

- respond to requests for input according to the State Office POC schedule
- identify and initiate recommendations if problems or concerns are identified with the crop insurance program
- when aware of program vulnerabilities in their county, COC must notify the State Office POC.

#### 122 Overview

## $\mathbf{A}$

## Background

This section describes the process for which RO will request STC to review and evaluate RMA MPCI program information. This process also provides a mechanism for RO to share and exchange crop program information with STC.

## 123 Types of Consultation Requests

## A RMA Consultation Requests

The type of requests submitted by RO to STC include but are not limited to the following:

program dates

**Examples:** Sales closing date, final planting date, initial planting date, etc.

- RMA T-yields
- statements (special provisions, MPCI crop policies, etc.)
- existing crop program expansion
- existing crop program deletion
- farming practices and crop types/varieties
- high-risk/unrated land.

## A **RO POC**

#### RO POC shall:

Information

- provide appropriate documentation and submit with AD-2006 (Exhibit 17) to the State Office POC
- complete the issue and background (including the level of review and deadlines for completion)
- inform the State Office POC of actions taken by RO as a result of the FSA recommendations.

## B **State Office POC** Information

Regardless of where the AD-2006 request is initiated, the State Office POC shall:

review the RMA request to determine whether all information is included for STC to review, evaluate, and provide a recommendation

Note: If the State Office POC determines additional information is needed, the State Office POC:

- may contact the County Office for additional or supporting information
- will specify the information needed, appropriate format and deadlines.
- respond to the request by completing FSA State Office recommendations with supporting justification and documentation. See Section 3.

#### 125-129 (Reserved)

#### 130 Overview

#### $\mathbf{A}$

## **Background**

This section describes the process for which STC can initiate and recommend changes to RMA MPCI crop programs through the State Office POC. This process also provides a mechanism for the State Office to share and exchange crop program information with RMA.

## 131 Types of Consultation Recommendations

## A FSA Consultation Recommendation

The type of recommendations submitted by STC to RO include, but are not limited to, the following:

program dates

**Examples:** Sales closing date, final planting date, initial planting date, etc.

- RMA T-yields
- statements (special provisions, MPCI crop policies, etc.)
- existing crop program expansion
- existing crop program deletion
- farming practices and crop types/varieties.

## A State Office POC Information

The State Office POC shall:

- if requested by STC, research and justify issue or concerns
- review issues and recommendations submitted by COC's/offices along with supporting documentation
- complete the issue and background (including the level of review and deadlines for completion)
- review the FSA County Office/Committee recommendation to determine if all information is included for STC to review, evaluate, and provide a recommendation. If the State Office POC determines additional information is needed, the State Office POC:
  - may contact the County Office for additional or supporting information
  - will specify the information needed, appropriate format and deadlines.

**Note:** Recommendations will be submitted through the State Office POC to the appropriate RO POC. Recommendations initiated by COC must be submitted to the State Office POC on AD-2006.

## B RO POC Information

RO shall inform STC of actions taken by RO as a result of the recommendation.

133-139 (Reserved)

#### **Section 3 Documentation**

#### 140 Required Minimum Documentation in Support of Recommended Program Changes

A Required Documentation

The County Office or STC shall use this table when initiating requests in support of recommended program changes on policies, plans of insurance, and materials related to these policies or plans of insurance. The State Office POC shall ensure that the minimum listed documentation associated to the type of program change is attached to AD-2006 in support of the recommendation.

Types of Requests Initiated by FSA	Minimum Documentation Needed in Support of the Program Change
Crop Expansion/Uninsured Practice/Type/Variety (P/T/V)	Type (for crop expansion) Practice Prices received (for crop expansion/type) Production history (yield per acre) Number of planted acres/producers Number of producers requesting insurance Market Evidence of adaptability
Planting Dates (Final/Initial)	Land grant universities Cooperative Extension Service Seed companies, etc.
RMA T-Yield	County yield history by P/T/V Cooperative Extension Service Land grant universities Other verifiable sources
Crop Program/P/T/V Deletions	Acreage trends Number of producers Loss of market/trends/processors

**Note:** For those types of requests initiated by RO for review, the State Office POC may contact RO POC for assistance as to the minimum supporting documentation required for the individual request. Additional documentation may be requested by RO POC from the State Office POC if further supporting documentation is required.

## 141-144 (Reserved)

#### **Section 4** Timelines

#### 145 General Timelines

#### A Overview

At a minimum, the State Office POC and RO POC shall meet annually to discuss crop program changes made for the current crop year and issues to be reviewed for subsequent crop years. Periodic meetings throughout the year may occur if deemed necessary to discuss work load and priorities.

## 146 RO Requests

## A RO Deadlines

Deadlines for completion of FSA reviews and the submission of recommendations to RO POC's will be coordinated. These deadlines to the extent possible will ensure timely implementation of these recommendations. RO POC shall notify the State Office POC of the action taken within 60 calender days of receiving the recommendation from the State Office POC.

#### 147 FSA Recommendations

## A FSA Recommendation Deadlines

FSA requests identifying crop program discrepancies and recommendations to correct such discrepancies can be initiated or submitted to RO POC at any time. Based on the nature of the request and findings, RO POC shall determine the appropriate action to be taken. RO POC shall notify the State Office POC of the action taken within 60 calender days of receiving the recommendation from the State Office POC.

**Reports** None

**Forms** This table lists all forms referenced in this handbook.

Number	Title	Display Reference	Reference
AD-1026A	Highly Erodible Land Conservation (HELC) and Wetland Conservation (WC) Certification		82, 83, Ex. 6
AD-2006	State and County Consultation Request	Ex. 17	121, 124, 132
AD-2006A	Consultation Request Log for AD-2006	Ex. 15	121
AD-2007	FSA/RMA Compliance Referral Form	Ex. 6	23, 70-74, Ex. 10
AD-2007A	FCIC Program Integrity Log for AD-2007	Ex. 10	73
CCC-502	Farm Operating Plan for Payment Eligibility Review		82, 83
CCC-666	Farm Stored Loan Quantity Certification		83
CCC-677	Farm Storage Note and Security Agreement		83
CCC-678	Warehouse Storage Note and Security Agreement		83
CCC-709	Direct Loan Deficiency Payment Agreement		83
CCC-Cotton A	Cotton Producer's Note and Security Agreement		83
CCC-Cotton AA	Upland Cotton Producer's Loan Deficiency Payment Application and Certification		83
FSA-425	Burley Tobacco and Peanut Information		82, 83
FSA-426-A	MPCI/FCIC Information Request	83	82
FSA-578	Report of Acreage		71, 82, 83, Ex. 6

Abbreviations Not Listed in 1-CM The following abbreviations are not listed in 1-CM.

Approved Abbreviation	Term	Reference
MPCI	Multiple Peril Crop Insurance	122, 123, 130, 131, Ex. 6
POC	point of contact	Text, Ex. 6, 17
RCO	Regional Compliance Office, Deputy Administrator for Compliance, RMA	Text, Ex. 5, 6, 10
RO	Regional Office, Deputy Administrator for Insurance Services, RMA	1, Part 5, Ex. 6, 15, 16, 17

Redelegations	
of Authority	

None

#### **Abuse**

<u>Abuse</u> is the improper or excessive use of authority. Abuse refers to administrative violations of Departmental, agency, or program regulations that impair the effective and efficient execution of programs. These violations may result in Federal losses or they may result in denial or reduction in lawfully authorized Federal benefits to participants.

# Determined Acreage

<u>Determined acreage</u> is acreage determined by an authorized FSA representative.

#### Fraud

<u>Fraud</u> is the intentional, wrongful obtaining or attempt of obtaining either money or some other advantage or benefit from governmental programs. Fraud includes but is not limited to, theft, embezzlement, false statements, illegal commissions, kickbacks, conspiracies, and obtaining contracts through collusive arrangements.

#### **Tolerance**

<u>Tolerance</u> is the number of acres that the reported acreage or allotment may differ from the determined acreage without either of the following:

- C the total loss of benefits
- C the overall accuracy of the acreage report being questioned.

#### Waste

<u>Waste</u> is incurring unnecessary costs as a result of inefficient or ineffective practices, systems, or controls.

The following is a list of RCO's and the States they serve.

Mailing Address of RCO's		States Served
1111 W. Mockingbird Lane Suite 280 Dallas, TX 75247 214-767-7700 (7:30 - 4:30 C) FAX: 214-767-7721	Arkansas Kentucky Louisiana Mississippi	New Mexico Oklahoma Tennessee Texas
4407 Bland Road Suite 280 Raleigh, NC 27609 919-875-4930 (7:00 - 4:30 E) FAX: 919-875-4928	Alabama Connecticut Delaware Florida Georgia Maine Maryland Massachusetts New Hampshire New Jersey	New York North Carolina Pennsylvania Puerto Rico Rhode Island South Carolina Vermont Virginia West Virginia
430 G Street Suite 4167 Davis, CA 95616-4167 530-792-5850 (7:00 - 4:00 P) FAX: 530-792-5865	Alaska Arizona California Hawaii Idaho	Nevada Oregon Utah Washington
3440 Federal Drive Suite 200 Eagan, MN 55122-1301 612-725-3730 (7:00 - 4:30 C) FAX: 612-725-3735	Iowa Minnesota Montana North Dakota	South Dakota Wisconsin Wyoming
6501 Beacon Drive Kansas City, MO 64133 816-926-7963 (7:30 - 4:00 C) FAX: 816-926-5186	Colorado Kansas Missouri Nebraska	
Corporate Center North 6905 Corporate Circle Indianapolis, IN 46278 317-290-3050 (7:30 - 4:00 E) FAX: 317-290-3065	Illinois Indiana Michigan Ohio	

 $\mathbf{A}$ 

Completing AD-2007

Complete one AD-2007 for each complaint or referral on file with the County Office. County Offices shall complete AD-2007 according to the instructions in the following table.

Item	Instructions
1	Enter the tracking number.
	Example: SS-CCC-YYYY-XXXX
	<b>Note:</b> For the first complaint filed in crop year 2001 in Wilbarger County, Texas, the tracking number assigned by the County Office would be 48-487-2001-0001.
	Part A - Complainant/Source Information (Optional)
2A	Enter name and address of the complainant. (Optional)
2B	Enter telephone number of the complainant. (Optional)
	Part B - Details of the Complaint
3	Indicate how the complaint was received.
	<b>Note:</b> If located on RMA compliance spot check list, go to Part C.
4	Enter name and address of the person or entity the complaint was filed against.
5	Record all crops stated in the complaint.
6	Record the crop year(s) in which the complaint occurred.
7	Record the State and county in which the complaint occurred. Record the exact location of the field(s) in the complaint by road, intersection, or landmark and farm serial number, if available.
8	This is the narrative of the complaint. It is necessary to include all details provided by the complainant including the current crop and field conditions. Be as specific as possible. Try to address who, what, where, when, and how.
9	Indicate how the complainant is aware of the situation.

A Completing AD-2007 (Continued)

Item	Instructions
10	Include any information the complainant has other than what is detailed in item 8. This could include photos, receipts, or other hard copy documentation. Include any other person or source of information.
11A	The FSA employee recording the information shall print and sign their name.
11B	Record the date the complaint is received.
	Part C - Insurance Verification
12	Before calling RCO for insurance verification, determine all entities and associated social security or tax identification numbers involved in the complaint.
13A	Print the name of the RCO POC that gave the insurance verification.
13B	Enter the date on which verification was given.
14	Indicate MPCI status as reported by RCO. If "No", no further action is required.
	Part D - FSA Fact Finding
15	Print the name of the FSA employee(s) involved in the fact finding.
16	Record the date the complaint was assigned for fact finding.
17A	Enter the farm number(s) associated with the farm(s).
17B	Enter the tract number(s) associated with the farm(s).
18	Indicate if FSA personnel visited the farm or area of complaint. If "No", briefly describe the results of the fact finding in item 22.
19	Indicate if FSA personnel took pictures of the farm or area of complaint.
20	Determine whether the condition described in the complaint are comparable to other like conditions in the area. If "No", explain in item 22.

A Completing AD-2007 (Continued)

Item	Instructions
21	List all FSA documentation that is attached to the form. This will include but is not limited to FSA-578, AD-1026A, photocopies, and crop specific FSA forms when required. Also, any CCC forms that were used as part of the FSA fact finding.
22	Comment on FSA findings (include explanation for items 18 and 20 if answered "No").
23	Enter the name, address, and telephone number of FSA County Office.
24	The FSA County Office reviewing official shall print and sign their name.
25	Enter the date the completed report was transmitted to the FSA State Office POC.
	Part E - State Office POC Action
26	Enter the name, address, and telephone number of FSA State Office.
27	Enter the date the referral was returned to the County Office by the State Office POC, if applicable.
28	Enter the date the referral was transmitted to RCO.
	Part F - RCO Action
29A	Enter RO's name and address.
29B	Enter RO's telephone number.
30	Indicate the action taken by RCO and the date RCO took action.

B Example of AD-2007

Following is an example of AD-2007.

	RTMENT OF AGRICULTURE arm Service Agency	1.	FSA TRACKING NUME	BER (13 Digit Number)*
	IPLIANCE REFERRAL F	ORM	48-487-20	01-0001
PART A - COMPLAINANT/SOUR	CE INFORMATION			
A. NAME AND ADDRESS OF PERSON		2B. TELEPHONE NUMBI	ER OF THE PERSON N	IAKING THE COMPLAINT
Joe Farmer				
123 Farmer Road			856-555-1234	
Anytown, TX 23456				
PART B - DETAILS OF THE COI	MPLAINT			
. FORM OF COMPLAINT: Phone	E-Mail In-F	Person X OTHER	: (Explain in Item 10)	
. NAME AND ADDRESS OF THE SU	BJECT OF THE COMPLIANT	5. CROP(S) STATED IN	COMPLAINT	
Jerry Neighbors			Cotton	
260 Neighbors Road				
Anytown, TX 12345		6. CROP YEAR(S) IN WH	11CH THE COMPLAINT	OCCURRED:
			2001	
. STATE & COUNTY WHERE COMP	LAINT OCCURRED (State exact locati		plaint by road, intersecti	on, or landmark and
farm serial number if available):		FSN 1234		
Field on north side of	Farmer Road at interse	ction with Neigh	bors Road	
. NARRATIVE OF THE COMPLAINT Ferry Neighbors planted	(Include all details including current cro	op and field conditions. Add	dress who, what, where,	
6. NARRATIVE OF THE COMPLAINT Jerry Neighbors planted since planting. The co  The co  HOW DOES COMPLAINANT KNOW  OOTHER INFORMATION NOT EXPINED  Seed may have been purc	(Include all details including current car the cotton on June 28 tton did not emerge, an  VITHE SITUATION? Hea  LAINED IN ITEM 8 (Include photos, rec	op and field conditions. Add and has not take and the weeds have determined the weeds have areas visconial to the weeds have areas. Visceipts, or other hard copy dealer, Anytown, The conditions are the weeds have all the weeds have a second to the weeds have a sec	dress who, what, where, en care of it e grown waist h	edge of Records ources of information):
Field on north side of  3. NARRATIVE OF THE COMPLAINT  Jerry Neighbors planted since planting. The co  9. HOW DOES COMPLAINANT KNOW  10. OTHER INFORMATION NOT EXPLOYED  Seed may have been pure the farm on the south seed for the farm of the	(Include all details including current car the cotton on June 28 tton did not emerge, an  VIHE SITUATION? Hea LAINED IN ITEM 8 (Include photos, rec chased from Big Seed Des	op and field conditions. Add and has not take and the weeds have determined the weeds have areas visconial to the weeds have areas. Visceipts, or other hard copy dealer, Anytown, The conditions are the weeds have all the weeds have a second to the weeds have a sec	tress who, what, where, en care of it grown waist he grown waist he waist he was a second with the second with Neighbors 11B. DATE (	edge of Records ources of information): tends s Road.
3. NARRATIVE OF THE COMPLAINT Jerry Neighbors planted since planting. The considerable of the constant of the	(Include all details including current on the cotton on June 28 tton did not emerge, and the situation?  WITHE SITUATION?  Here the situation of the sit	op and field conditions. Add and has not take and has not take and the weeds have been something or other hard copy dealer, Anytown, To the intersection	tress who, what, where, en care of it grown waist he grown waist he waist he was a second with the second with Neighbors 11B. DATE (	edge of Records ources of information): tends s Road.

B Example of AD-2007 (Continued)

	COMPLAINT KNOWN BY FSA AND T	THEIR ASSOCIATED SSNs AND/OR TAX II	DENTIFICATION NUMBERS:
ENTITY NAME	SSN NO. OR TAX ID NO.	ENTITY NAME	SSN NO. OR TAX ID NO.
A. Neighbors Farms, Inc.	12-345-6789	В.	
C.		D.	
13A. NAME OF REGIONAL COMPLIAN	L NCE OFFICE CONTACT	13B. D	DATE CONTACTED
	Sally Investigator		08-11-01
14. MPCI? (Check one of the boxes be YES X	elow. If "No" is checked, no further ac	tion is required.)	
PART D - FSA FACT FINDING			
15. NAME OF FSA OFFICIAL INVOLVI	ED IN FACT FINDING	16. DATE THE COMPLAINT WAS ASS	SIGNED TO FSA OFFICIAL
Henry Fie	ldman	08-12-0	
17A. FARM FSN NUMBER	17B. FARM TRACT NUMBER	18. DID FSA PERSONNEL VISIT THE	
1234	1610	COMPLAINT? (If "No," explain in I	tem 22.) NO
19. DID FSA PERSONNEL TAKE PHO- COMPLAINT?	L TOS OF THE FARM OR AREA OF	20. WAS THE CONDITION OF THE COTHER LIKE CONDITIONS IN TH	OMPLAINT COMPARABLE TO
YES X N	0	Item 22.)	NO X
	ce is needed, attach and sign a separa Jerry Neighbors' cottor	. Photos 4, 5, and 6 were	
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are Joe Farmer's field. Ne.	ce is needed, attach and sign a separa Jerry Neighbors' cottor ighbors' cotton has wee		oor stand.
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are Joe Farmer's field. Ne. Surrounding farms have	ce is needed, attach and sign a separ Jerry Neighbors' cottor ighbors' cotton has wee cotton planted and the	$^{ m a}$ . Photos 4, 5, and 6 were ds waist high and has a per-	oor stand. d have been
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are Joe Farmer's field. Ne. Surrounding farms have well taken care of.  23. FSA COUNTY OFFICE NAME & A Wilbarger County FSA	ce is needed, attach and sign a separa Jerry Neighbors' cottor ighbors' cotton has wee cotton planted and the	a. Photos 4, 5, and 6 wereds waist high and has a poor	oor stand. d have been DFFICIAL
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of Joe Farmer's field. Ne. Surrounding farms have of well taken care of.  23. FSA COUNTY OFFICE NAME & A Wilbarger County FSA 5015 College Drive, Room	ce is needed, attach and sign a separa Jerry Neighbors' cottor ighbors' cotton has wee cotton planted and the	24. NAME OF FSA COF REVIEWING COME RUNNING COME RUN	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are Joe Farmer's field. Ne. Surrounding farms have well taken care of.  23. FSA COUNTY OFFICE NAME & A Wilbarger County FSA 5015 College Drive, Room Vernon, TX 76384	ce is needed, attach and sign a separa Jerry Neighbors' cottor ighbors' cotton has wee cotton planted and the	24. NAME OF FSA COF REVIEWING C	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of the space o	ce is needed, attach and sign a separal Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the DDRESS (Include Zip Code)	24. NAME OF FSA COF REVIEWING COME RUNNING COME RUN	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of the space o	ce is needed, attach and sign a separa.  Jerry Neighbors' cotton  ighbors' cotton has wee  cotton planted and the  DDRESS (Include Zip Code)  n 1  553-4394	24. NAME OF FSA COF REVIEWING COME RUNNING COME RUN	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of Joe Farmer's field. Ne. Surrounding farms have well taken care of.  23. FSA COUNTY OFFICE NAME & A Wilbarger County FSA 5015 College Drive, Room Vernon, TX 76384  TELEPHONE NUMBER: 940-1  PART E - STATE POC'S ACTION 26. FSA STATE OFFICE NAME & ADD Texas State FSA Office 2405 Texas Avenue	ce is needed, attach and sign a separa.  Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the  DDRESS (Include Zip Code)  a 1  S  RESS (Include ZIP Code.)	24. NAME OF FSA COF REVIEWING C Sam Runne 25. DATE TO STO  08-18-0	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of the space o	ce is needed, attach and sign a separa.  Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the  DDRESS (Include Zip Code)  n 1  S RESS (Include ZIP Code.)	24. NAME OF FSA COF REVIEWING OF Sam Runner 25. DATE TO STO 08-18-0.	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of the space o	ce is needed, attach and sign a separa.  Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the  DDRESS (Include Zip Code)  a 1  S  RESS (Include ZIP Code.)	24. NAME OF FSA COF REVIEWING C Sam Runne 25. DATE TO STO  27. DATE TO COF	oor stand. d have been DFFICIAL er
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of the space o	ce is needed, attach and sign a separation of the control of the c	24. NAME OF FSA COF REVIEWING C Sam Runne 25. DATE TO STO  27. DATE TO COF	oor stand. d have been  DFFICIAL er  1
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are of the space o	ce is needed, attach and sign a separa. Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the  DDRESS (Include Zip Code) a 1 553-4394 S RESS (Include ZIP Code.)  840 680-5150  DRESS (Include ZIP Code) Lance Office	24. NAME OF FSA COF REVIEWING OF SAME RUNNERS.  25. DATE TO STO  27. DATE TO COF  28. DATE TO RCO  29B. REGIONAL OFFICE TELEPHON	DOFFICIAL  PET  1  1  IE NUMBER
AD-1026A  22. FSA COMMENTS (If additional spa Photos 1, 2, and 3 are photos 3, and 3 are photos 3	ce is needed, attach and sign a separa. Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the  DDRESS (Include Zip Code) a 1 553-4394 S RESS (Include ZIP Code.)  840 680-5150  DRESS (Include ZIP Code) Lance Office	24. NAME OF FSA COF REVIEWING OF Sam Runner  25. DATE TO STO  27. DATE TO COF  28. DATE TO RCO  08-22-0	DOFFICIAL  PET  1  1  IE NUMBER
AD-1026A  22. FSA COMMENTS (# additional spa Photos 1, 2, and 3 are of the property of the pro	ce is needed, attach and sign a separa.  Jerry Neighbors' cotton ighbors' cotton has week cotton planted and the  DDRESS (Include Zip Code)  a 1  553-4394  S  REESS (Include ZIP Code)  840  680-5150  DRESS (Include ZIP Code) Lance Office ane, Suite 280	24. NAME OF FSA COF REVIEWING C Sam Runne 25. DATE TO STO  27. DATE TO COF  28. DATE TO RCO  29B. REGIONAL OFFICE TELEPHON 214-767-7	DOFFICIAL  PET  1  1  IE NUMBER

A

Completing AD-2007A

Complete one AD-2007A for each crop year. County Offices shall complete AD-2007A according to the instructions in the following table.

Item	Instructions
1	Enter crop year.
2	Enter sequential page number for the calendar year.
3	Enter State code.
4	Enter county code.
5	Enter the tracking number.
	Example: SS-CCC-YYYY-XXXX
	<b>Note:</b> For the first complaint filed in crop year 2001 in Wilbarger County, Texas, the tracking number assigned by the County Office would be 48-487-2001-0001.
6	Enter the producer name for which there is a concern.
7-10	Check the applicable column for the type of review.  7 = complaint received by the County Office (this could be in person, telephone, etc.)  8 = concern discovered by FSA through normal FSA activity  9 = request by RCO  10 = review of producer on the RMA spot check list
11	If entry in item 7, 8, or 9, enter the date County Office became aware of the concern. If entry in item 10, enter the date the review is conducted.
12	Enter the date a referral was submitted if applicable.
13	Enter total of each column to reflect the number entered on the log in each category, total number received of all categories, and total of actual referrals submitted.

B Example of AD-2007A

Following is an example of AD-2007A.

<b>AD-2007A</b> (04-04-01)	Include form number and date U.S. DEPARTMENT OF AGR Farm Service Agency	RICULTURE		1.	CROP YEAR 2001			NUMBER  1 of 1
FCIC PROGRAM INTEGRITY LOG FOR AD-2007				3.	3. STATE CODE			NTY CODE
5. Reference/ Tracking Number	6. Producer Name	(Enter a	a check mark b	REVIEW pelow for the review.)		11 Dat County	te Office	12. Date Referral
(13 Digits) (From AD-2007, Item 1)	(From AD-2007, Item 4)	7. Complaint Received by COF	8. FSA Discovery	9. RCO Referral	10. RMA Spotcheck List	became aware of the concern or the date review was conducted.	Submitted	
48-487-2001-0001	. Jerry Neighbors					08-1	0-01	08-18-01
		<u> </u>			-			
	1							
	+							
		<u> </u>						
13. TOTALS								



	United States Department of Agriculture
	Farm and Foreign Agricultural Services Risk Management Agency
	SUBMISSION DATE
TO:	, COUNTY EXECUTIVE DIRECTOR COUNTY
THRU:	, STATE OFFICE POINT OF CONTACT
FROM:	, DIRECTOR REGIONAL COMPLIANCE OFFICE
SUBJECT:	REQUEST FOR FIELD VISIT TO VERIFY CROP INSURANCE DATA
have been ident	MA compliance office is currently conducting its Manual 14 program review. Discrepancies ified with the insurance company's claim audit listed below. The following assistance aim is being requested for:
INSURED NAM	E: POLICY NUMBER:
INSURED ID:	
REQUESTED A	CTION:
1	
	CE CONTACT PERSON
	TELEPHONE: ( ) -
FAX: ()	E-MAIL:
Please forward	all documentation along with a copy of this form, by, to the individual listed below.
RMA POINT OF	CONTACT
NAME:	TELEPHONE: ( ) -
FAX: <u>(</u> )	E-MAIL:



The Risk Management Agency Administers and Oversees All Programs Authorized Under the Federal Crop Insurance Corporation

An Equal Opportunity Employer

A

Completing AD-2006A

Complete AD-2006A according to this table.

Item	Instructions
1	Enter the crop year the issue is referred to RO for action.
2	Enter page number of the log.
3	Enter the State Office or RO name.
4	Enter the next consecutive tracking number.
5	Identify the issue. Ensure to include enough information to accurately identify the issue.
6	Enter date referred for RO action.
7	Enter date of RO action.

B Example of AD-2006A

Following is an example of AD-2006A.

AD-2006A	U.S.	DEPARTMENT OF AGRICULTURE	1. CR	OP YEAR	2. PAGE NUMBER	
(04-05-01)		Farm Service Agency		2002	to	
CONSTI	TATI	ON REQUEST LOG FOR AD-2006	3 NA	ME OF STATE OR RMA		
CONSU	-1A11	ON REQUEST LOG FOR AD-2006	3. NAME OF STATE OR RMA REGIONAL OFFICE California State Office			
4. Tracking Numbe (11 Digits) (From AD-2006, Ite		5. Issue (From AD-2006, Item 3)	•	6. Date Referred for RO Action (From AD-2006, Item 7E	7. Date of RO Action (From AD-2006, Item 9C)	
200106F0001		Sales closing date for peaches for Napa County				
				1		

The following is a list of all RO's and the States they serve.

Mailing Address of RO	States Served
Suite 106 2110 Overland Avenue Billings, MT 59102-6440 406-657-6447 (8:00 - 4:30 MST) FAX: 406-657-6573	Montana North Dakota South Dakota Wyoming
430 G Street, # 4168 Davis, CA 95616-4168 530-792-5870 (7:30 - 4:00 P) FAX: 530-792-5893	Arizona Nevada California Utah Hawaii
Suite 160 4407 Bland Road Raleigh, NC 27609 919-875-4880 (8:00 - 4:30 E) FAX: 919-875-4915	Connecticut New York Delaware North Carolina Maine Pennsylvania Maryland Rhode Island Massachusetts Vermont New Hampshire Virginia New Jersey West Virginia
8 River Bend Place Jackson, MS 39208 601-965-4771 (7:30 - 4:00 C) FAX: 601-965-4517	Arkansas Mississippi Kentucky Tennessee Louisiana
Suite 170 205 NW 63rd. Street Oklahoma City, OK 73116-8209 405-879-2700 (7:30 - 4:00 C) FAX: 405-879-2741	New Mexico Oklahoma Texas

## List of RO's and States Served (Continued)

Mailing Address of RO	States Served
30 E. 7th Street 910 Minn. World Trade Center St. Paul, MN 55101 651-290-3304 (7:30 - 4:00 C) FAX: 651-290-4139	Iowa Minnesota Wisconsin
3500 West Wabash Avenue Springfield, IL 62707 217-241-6600 (7:30 - 4:00 C) FAX: 217-241-6618	Illinois Indiana Michigan Ohio
112 N. University Road Suite 205 Spokane, WA 99206-5295 509-353-2147 (7:00 - 4:00 P) FAX: 509-353-3149	Alaska Idaho Oregon Washington
3401 SW Van Buren Street Topeka, KS 66611-2227 785-266-0248 (7:30 - 4:00 C) FAX: 785-266-2487	Colorado Kansas Missouri Nebraska
106 South Patterson Street Suite 250 Valdosta, GA 31601 229-219-2200 (8:00 - 4:30 E) FAX: 229-244-6103	Alabama Florida Georgia Puerto Rico South Carolina

A Completing AD-2006

STC, RO POC, State Office POC, COC, and County Offices shall complete AD-2006 according to the instruction in the following table. Attach additional sheets and supporting documentation, as necessary, to thoroughly explain the issue, provide background, justify recommendations, or explain the action.

Item	Instruction
1	Tracking Number: Depending on the origin of the request the State Office POC or RO POC will assign a 9-digit alpha numeric tracking number (for example, 200106F0001). The first 4 digits will be the calendar year the request is made (for example, 2001 = 2001), the third and fourth digit identifies the State location (for example, California = 06), the fifth digit identifies the origin of the request (for example, F for FSA or R for RMA), the next 4 digits are used for the request number in chronological order (for example, request number 1 = 0001).
2	Date originated.
3	Issue: The originator (RO POC, State Office POC, STC, COC) of the request states the subject and the task to be completed.
4	Background: The originator describes the subject and/or process and any other pertinent information in assisting the recipient in making their determination. Other information may include but not limited to why the task needs to be completed or what specific information needs to be reviewed.
5	STC Recommendation: The appropriate action recommended.
6	Justification: Supporting documentation provided for the action recommended (Part 5, Section 3).
7A	STC Signature: An STC member or their appointed designee will sign the request.
7B	Date Sent: The date the State Office POC sent the request to RO POC.
8	RO Explanation/Action: Describe the appropriate action taken by RO and the reason for the action. If the request is accepted, explain when the action will occur.
9A	RO POC signature.
9B	Check whether action is concurred or non-concurred.
9C	Enter date signed.
10	RO name.
11	State Office name and address.

## B Example of AD-2006

Following is an example of AD-2006.

<b>AD-2006</b> (04-05-01)	U.S. DEPARTMENT OF AGR Farm Service A			1. TRAC	1. TRACKING NUMBER (11 Digit Number)* 200148F0001		
STATE	AND COUNTY CONSUL	TATION REOL	IEST	2. DATE	ORIGINATED		
OIAIL	AND GOOM I GONGOL	. TATION NEGO	J_0.		04-03-2001		
3. ISSUE (State the	issue as briefly as possible):						
Valid final	planting dates of April	. 15 for corn	in the f	following	counties:		
Dallas, Elli	s, Navarro, Freestone,	Leon, Limesto	ne, Hill	L, Johnson	, Tarrant,		
Denton, Wise	, Parker, Hood, McLenna	in.					
4. BACKGROUND	State who does the issue impact; how	does the issue impact	you or your c	onstituency?)			
-	ng dates must adhere to		_				
_	be planted with the ex	-	-	-	-		
the date at	which time at least 90%	of the crop	is norma	ılly plant	ed in the county.		
5. STATE COMMIT	TEE RECOMMENDATION (State the c	committee's recommen	dation as brie	efly as possible):			
	ng dates for Dallas, El						
from April 1	5 to May 31.						
	(Fully explain your recommendation):						
	final planting date of	-	_		-		
	essive heat in July that Elinate properly and ult						
-	on from Extension.	ormacory round	,, ,,,	1014. 000	, 455451154		
74 STATE COMMI	TTEE MEMBER'S OR DESIGNEE'S SI	IGNATURE			7B. DATE SENT TO RMA REGIONAL		
/s/ James Jo					OFFICE'S POC 04-03-01		
8. REGIONAL OFFI							
	ur recommendation in pa	art. We plan	to chang				
	-	_	_				
to April 7 b	y the next filing date.	Our concern		-			
to April 7 b is that in y	y the next filing date. ears when the crop can	Our concern and should be	replant	-			
to April 7 b is that in y	y the next filing date.	Our concern and should be	replant	-			
to April 7 b is that in y	y the next filing date. ears when the crop can	Our concern and should be	replant	-			
to April 7 b is that in y	y the next filing date. ears when the crop can	Our concern and should be	replant	-			
to April 7 b is that in y made to do s	y the next filing date. ears when the crop can	Our concern and should be	replant	-			
to April 7 b is that in y made to do s 9A. REGIONAL OFI /s/ Franklin	y the next filing date. The sears when the crop can so which would adversly  FICE POC'S SIGNATURE  Harrison	Our concern and should be affect the pr  9B. REGIONAL O	replant rogram.  FFICE:	on-concurred	empt will be  9C. DATE SIGNED  05-22-01		
to April 7 b is that in y made to do s  9A. REGIONAL OFI /s/ Franklin  10. RMA REGIONAL	y the next filing date. The sears when the crop can so which would adversly  FICE POC'S SIGNATURE  Harrison  OFFICE NAME & ADDRESS (Include)	Our concern and should be affect the pr   9B. REGIONAL O  X Concurred	FFICE:  No.	on-concurred	empt will be  9C. DATE SIGNED		
to April 7 b is that in y made to do s  9A. REGIONAL OFI /s/ Franklin 10. RMA REGIONAL USDA Risk Ma	y the next filing date. The sears when the crop can so which would adversly  FICE POC'S SIGNATURE  Harrison  OFFICE NAME & ADDRESS (Include nagement Agency)	Our concern and should be affect the pr   9B. REGIONAL O  X Concurred	FFICE:  No.  No.  No.  No.  Texas Sta	on-concurred TE OFFICE NAI tate FSA	empt will be  9C. DATE SIGNED  05-22-01  ME & ADDRESS (Include ZIP Code)		
to April 7 b is that in y made to do s  9A. REGIONAL OFI /s/ Franklin  10. RMA REGIONAL USDA Risk Ma Regional Off	y the next filing date. The sears when the crop can be which would adversly  FICE POC'S SIGNATURE  Harrison  LOFFICE NAME & ADDRESS (Include nagement Agency ice	Our concern and should be affect the pr  9B. REGIONAL O  X Concurred	FFICE:  No.  No.  II. FSA STA  Texas St 2405 Tex	on-concurred TE OFFICE NA tate FSA kas Avenue	9C. DATE SIGNED  95-22-01  ME & ADDRESS (Include ZIP Code)		
to April 7 b is that in y made to do s  9A. REGIONAL OFI /s/ Franklin  10. RMA REGIONAL USDA Risk Ma Regional Off	y the next filing date. The sears when the crop can so which would adversly  FICE POC'S SIGNATURE  Harrison  COFFICE NAME & ADDRESS (Include nagement Agency ice  Street, Suite 170	Our concern and should be affect the pr  9B. REGIONAL O  X Concurred	FFICE:  No.  No.  II. FSA STA  Texas St 2405 Tex	on-concurred TE OFFICE NAI tate FSA	9C. DATE SIGNED  95-22-01  ME & ADDRESS (Include ZIP Code)		
to April 7 b is that in y made to do s  9A. REGIONAL OFI /s/ Franklin  10. RMA REGIONAL USDA Risk Ma Regional Off 205 NW 63rd Oklahoma Cit TELEPHONE NU	y the next filing date. The sears when the crop can so which would adversly  FICE POC'S SIGNATURE  Harrison  OFFICE NAME & ADDRESS (Include nagement Agency ice Street, Suite 170  y, OK 73116  JMBER:	Our concern and should be affect the pr  9B. REGIONAL O  X Concurred	FFICE:  No.  No.  No.  Texas State 2405 Texas College	on-concurred TE OFFICE NA tate FSA kas Avenue	9C. DATE SIGNED  95-22-01  ME & ADDRESS (Include ZIP Code)		
9A. REGIONAL OFI  /s/ Franklin  10. RMA REGIONAL USDA Risk Ma Regional Off 205 NW 637  TELEPHONE NU  *TRACKING NUMB Digits 1 through 4 Digits 5 & 6 identifies th	y the next filing date. The sears when the crop can so which would adversly  FICE POC'S SIGNATURE  Harrison  COFFICE NAME & ADDRESS (Include nagement Agency ice  Street, Suite 170  y, OK 73116	Our concern and should be affect the pr  9B. REGIONAL O  X Concurred  2IP Code)  1  s made (i.e., 2001 = 20 iia = 00). for RMA).	FFICE:  No.  No.  No.  No.  No.  No.  No.  No	on-concurred TE OFFICE NA tate FSA kas Avenue Station,  DNE NUMBER:	9C. DATE SIGNED  95-22-01  ME & ADDRESS (Include ZIP Code)		
9A. REGIONAL OFI  /s/ Franklin  10. RMA REGIONAL  USDA RISK Ma  Regional Ofi  205 NW 63rd  Oklahoma Cit  TELEPHONE NU  *TRACKING NUMB  Digits 14 brough 1  Digits 5 & 6 identifi  Digit 7 identifies th  Digits 8 through 1  The U.S. Department of	y the next filling date. The sears when the crop can so which would adversly so which would adversly so which would adversly  FICE POC'S SIGNATURE  Harrison  OFFICE NAME & ADDRESS (Include nagement Agency ice Street, Suite 170  y, OK 73116  JMBER:  ER (11 Digits alpha numeric): Identify the calendar year the request is the street of the	Our concern and should be affect the pr  BB. REGIONAL O  X Concurred of ZIP Code)  s made (i.e., 2001 = 20 inia = 06). for RMA). logical order (i.e., requi	FFICE:  No.  No.  No.  No.  No.  No.  No.  No	on-concurred TE OFFICE NA :ate FSA tas Avenue Station,  DNE NUMBER:  = 0001). assis of race, color,	9C. DATE SIGNED  95-22-01  ME & ADDRESS (Include ZIP Code)		